

Try to ease the mind of the patient, encourage him to look forward to being cured, even if thou are not thyself convinced of it, for this will greatly strengthen his nature.

When the patient does not follow thine injunctions or his servants and people do not promptly obey thine instructions or show thee the proper respect, it were better to give up the treatment.

Fix the fee of thy patient when his disease is in its ascendancy and most severe, for as soon as he is cured he will forget what service thou hast rendered.

The more thou demandest for thy service, the higher thou fixest the fee for thy treatment, the greater will they appear in the eyes of the people. Thine art will be looked upon as insignificant by those whom thou treatest for nothing.

Do not visit thy patient too often and do not remain with him too long, unless the treatment of the disease demands it, for it is seeing the doctor anew that gives joy to the patient.

Too large a practice confuses the judgment of the physician and causes him to give mistaken directions.

Excessive activity and effort diminishes the power of the physician and weakens his spirit, for he must constantly think and be concerned about each patient, hopeful for his recovery, and pray for him as though he were "one of his kin, that is near to him" (Lev. xxi, 2). Isaac Judaeus, 830-932 A. D.

## Book Reviews

**1917 Collected Papers of the Mayo Clinic**, Rochester, Minn. Octavo of 866 pages, 331 illustrations. Philadelphia and London: W. B. Saunders Company, 1918. Cloth, \$6.50 net.

Again we welcome a Mayo volume. The clear, lucid style of not only the Mayo papers, but of the collaborators, is a joy to the reader. The personal element, the clear technic, even to details (as in the intravenous injections) are eagerly read, knowing that they are the results of vast and critical experience. The alimentary canal papers are somewhat limited as to space. On the other hand, the experimental laboratory comes in for a good share of the pages. Surgery of the spleen forms quite a complete picture. The chapters on trench foot, the war's influence on medicine, and medical service in the United States are interesting. Syphilis covers several chapters, and, notwithstanding the mass of literature already before us on this subject, we read again, with benefit, of the treatment being used in the Mayo clinics. The volume of 1917 papers is worthy of a place beside its predecessors.

M. I. J.

**Surgical Clinics of Chicago**. Volume 2, Number 4 (August 1918). Octavo of 202 pages, 110 illustrations. Philadelphia and London: W. B. Saunders Company, 1918. Published bi-monthly. Price per year: Paper, \$10.00; cloth, \$14.00.

Contents.—L. L. McArthur: Tumor of the pituitary gland. Kellogg Speed: Transarticular cap-

sulorrhaphy on the knee. A. D. Bevan: Hemangioma of the scalp. Skin grafting: burn of chest repaired by Thiersch grafts. Sarcoma of the lower jaw. Carcinoma of larynx. Carl Beck: Partial rhinoplasty. Treatment of Phlegmon of hands and fingers. D. N. Eisendrath: Acute Abdomen. W. J. Woolston: Malignant disease of cervical stump after supravaginal hysterectomy. E. L. Moorhead; Clinic. G. L. McWhorter: Surgical treatment of needles in the hand. Isolated and complete dislocation of fifth carpometacarpal joint. Harry Culver: Pyelonephritis. L. E. Schmidt: Operative treatment of urethral fistula. Technical errors in the operative treatment of urethral stricture. H. L. Kretschmer: Fulguration treatment of tumors of the bladder. Fulguration treatment of urethral caruncle. Wm. Hessert: Surgical clinic on fractures. G. D. J. Griffin: General discussion of fractures.

**A Manual of Otology** by Gorham Bacon, assisted by Truman Laurance Saunders. 7th edition. 566 pp. New York and Philadelphia: Lea & Febiger, 1918. Price, \$3.00.

This well known textbook will, in its last edition, make new friends among readers of otology. The authors have spared no effort to bring their information up to date. In order to emphasize the importance of the operative treatment in adenoid growths, enlarged tonsils and suppurative diseases of the labyrinth, the chapters on these subjects have been entirely rewritten and enlarged. A chapter on the submucous resection of the nasal septum has been included so as to make the reader entirely comfortable in the specialty. It might have been proper here to mention Ballenger's swivel knife as a convenient and safe instrument. The educational influence of the war in medicine is shown by the addition of a new chapter giving the details of U. S. requirements for testing the ears of aviation candidates. The text gives all through the book an impression of reliability by its terse, matter-of-fact language. Short case histories keep one at all times in close touch with the patients in private practice, hospital clinics and in the literature. The directions given and the numerous prescriptions are dependable. Over 200 illustrations, largely from photographs, make the instruction given understood beyond all doubt. The student and the general practitioner will find Bacon's Otology a handy book for study and reference.

H. B. C.

### Headaches and Eye Disorders of Nasal Origin.

By Dr. Greenfield Sluder. 272 pp. St. Louis: Mosby, 1918.

The author has become convinced that the nasal factors are more frequently the cause of "asthenopia," than systemic disorders. He does not so much deal with cases where the relation between a sinus suppuration present and the patient's symptoms is evident, as with those where suppuration has ceased (operated or not) or where none has been found; but where the symptoms still continue. This class comprises three groups: (1) vacuum frontal headaches with eye symptoms only; (2) spino-palatine ganglion neurosis; (3) hyperplastic edema of the postethmoid-sphenoid area. In about 200 pages, beautifully illustrated and easily read, the author painstakingly describes how the close anatomical relationship of passing nerves exposes them to the occasionally vicious contents of the nasal accessory sinuses causing the peripheral symptoms, of which "the lower half headache" is the more prominent, and how these disorders are diagnosed and treated. About 50 pages of case histories further illuminate his conclusions. The